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JAN 17 2006

<b>To:</b>	U.S. Patent and Trademark Office Examiner: C. Lynne Anderson Group: 3761	<b>From:</b>	Laura M. Hagan Reg. No. 38,902
<b>Fax:</b>	571-273-8300	<b>Pages:</b>	6
<b>Re:</b>	Johnny Maxwell Vaginal Cleansing Swab Serial No. 10/664,489	<b>Date:</b>	January 17, 2006

This facsimile is in response to the Office Action mailed on November 30, 2005. Following is a:

- 1) Transmittal Form; and
- 2) Response to Office Action.

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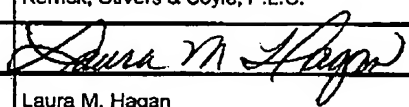
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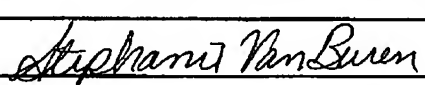
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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	10/664,489	<b>RECEIVED CENTRAL FAX CENTER JAN 17 2006</b>
	Filing Date	09/17/2002	
	First Named Inventor	Maxwell	
	Art Unit	3761	
	Examiner Name	C. Lynne Anderson	
Total Number of Pages in This Submission	5	Attorney Docket Number	01-219

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	Kerrick, Stivers & Coyle, P.L.C.	
Signature		
Printed name	Laura M. Hagan	
Date	1/17/06	Reg. No. 38,902

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Typed or printed name	Stephanie Van Buren	Date 1-17-06

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application: 10/664,489

Unit No.: 3761

Title: Vaginal Cleansing Swab

Examiner: C. Lynne Anderson

Inventor: Johnny Maxwell


Filing Date: 09/17/2002

Our File No.: 01-219

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Stephanie Van Buren  
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Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Ms. Anderson:

In response to the Office Action dated November 30, 2005, the Applicant has amended the application as follows: